10-29-04

Approved for use through 10/31/2002. OMB 0651-0031

| CAT &  | MARENIA  |  | uired to respond to a collection of information unless if displays  Docket N  UNDER 37 CFR 1.136(a) |           | Oocket Number (Optional) 00237.US1 |  |
|--|--|--|---|-----------|------------------------------------|--|
|  | 100 8 8 100 PE 1 |  | In re Application of Vogeli, et. al.  |           |                                    |  |
| Ī  |  |  | Application Number 09/714,449   |           | Filed 11/10/2000                   |  |
| Š  |  |  | For Novel G Protein Coupled Receptors   |           |                                    |  |
|  |  |  | oup Art Unit<br>1646  |           | Examiner  Joseph F. Murphy         |  |
|  | This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.   |  |   |           |                                    |  |
|  | The requested extension and appropriate non-small-entity fee are as follows (check time period desired):   |  |   |           |                                    |  |
|  | One month (  | 37 CFR 1.17(a)(1))   |   |           | \$                                 |  |
|  | Two months   | (37 CFR 1.17(a)(2)   | )   |           | \$ <u>430.00</u>                   |  |
|  | Three month  | s (37 CFR 1.17(a)(   | 3))   |           | \$                                 |  |
|  | Four months (37 CFR 1.17(a)(4))  |  |   |           | \$                                 |  |
|  | Five months (37 CFR 1.17(a)(5))  |  |   |           |                                    |  |
|  | Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.   |  |   |           |                                    |  |
|  | Payment by credit  | Payment by credit card. Form PTO-2038 is attached.   |   |           |                                    |  |
|  | The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number  I have enclosed a duplicate copy of this sheet.   |  |   |           |                                    |  |
|  |  |  |   |           |                                    |  |
|  |  |  |   |           |                                    |  |
|  | I am the applicant/inventor  |  |   |           |                                    |  |
|  | assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record.  attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a)   |  |   |           |                                    |  |
|  |  |  |   |           |                                    |  |
|  |  |  |   |           |                                    |  |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. |  |  |   |           |                                    |  |
|  |  |  |   | Mad .     | Neleber                            |  |
|  | Date   |  |   | Signature | •                                  |  |
|  |  | 09714449   |   | Edward F. | Rehberg                            |  |
| 01 FC:1252   | 430.00 DA  |  |   | Typed or  | printed name                       |  |
|  |  | OTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple rms if more than one signature is required, see below. |   |           |                                    |  |
|  | ☐ Total of   | orms are submitted.  |   |           |                                    |  |